PRISONER'S CIVIL RIGHTS COMPLAINT (Rev. 05/2015)

IN THE UNITED STATES DISTRICT COURT FOR THE FASTERN DISTRICT OF TEXAS TYLER DIVISION

ASH BAKRE, # 784509
Plaintiff's Name and ID Number
PACK I UNIT, TDCJ. Place of Confinement

CASE NO. 6.19 CV 298
(Clerk will assign the number)

DEBORAH KENDALL, PHYSICAL THERAPIST, BETO I UNIT Defendant's Name and Address

JAMES BJORNSON, BETO | UNIT, 1391 FM 3328, TENN. COLONY, TX 75880 Defendant's Name and Address

<u>Noctor ABRON, Michael Unit, 2664</u> fm 2054, Tenn. colony, Tx 15886 Defendant's Name and Address (DO NOT USE "ET AL.")

INSTRUCTIONS - READ CAREFULLY

NOTICE:

v.

Your complaint is subject to dismissal unless it conforms to these instructions and this form.

- 1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
- 2. Your complaint must be <u>legibly</u> handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, <u>DO NOT USE THE REVERSE</u> SIDE OR BACK SIDE OF ANY PAGE. ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
- 3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
- 4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

MICHAEL SIZEMORE, BETO I UNIT, 1391 FM 3328
Defendant 25 Name and Address TENN-COLONY, TX 75880

DOE, OFFICE OF PROFESSIONAL STANDARD (UTMB) TOCT HEALTH SERVICES DIVISION Defendant'S Name and Address HUNTSVILLE, TEXAS

FILING FEE AND IN FORMA PAUPERIS (IFP)

- 1. In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$50.00 for a total fee of \$400.00.
- 2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis*, setting forth information to establish your inability to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed *in forma pauperis* and the certificate of inmate trust account, also known as *in forma pauperis* data sheet, from the law library at your prison unit.
- 3. The Prison Litigation Reform Act of 1995 (PLRA) provides "... if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." *See* 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$50.00 administrative fee does not apply to cases proceeding *in forma pauperis*.)
- 4. If you intend to seek *in forma pauperis* status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

CHANGE OF ADDRESS

I.

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "NOTICE TO THE COURT OF CHANGE OF ADDRESS" and shall not include any motion for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

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PREVIOUS LAWSUITS:				
. Have you filed <i>any</i> other lawsuit in state or federal court relating to your imprisonment? <u>/</u> YESN				
B. If your answer to "A" is "yes," describe each lawsuit in the space below. (If there is more than or lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)				
1. Approximate date of filing lawsuit: APRIL, 2017				
2. Parties to previous lawsuit:				
Plaintiff(s) ASH BAKKE				
Defendant(s) SPERRY STEVEN, SUSAN BISCOE, JOHN DOE				
3. Court: (If federal, name the district; if state, name the county.) U.S.DIC. EASTERN DISTRICT				
4. Cause number: 6:17 CV 239				
5. Name of judge to whom case was assigned: Hon. JUDGE RON CLARK				
6. Disposition: (Was the case dismissed, appealed, still pending?) 15 MISSED				
7. Approximate date of disposition: TUNE 2, 2017				

1. Approximate date of filing lawsuit: 1999
2- Party to previous lawsuit:
Plaintiffs ASH BAKRE
Defendants) CHRISTOPHER IVINS, BLAKE LAMB
3. Court: U.S.D.C. EASTERN DISTRICT
4. Cause number: 9:99-CV-140
5. Name of judge to whom case was assigned: I DO NOT REMEMBER
6. Disposition: DISMISSED (JURY VERDICT)
7. Approximate date of disposition: U.S. at moon
(FAILURE TO MOVE FOR JUDGMENT AS A MATTER OF LAW. OR AFTER THE

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II. PLACE OF PRESENT CONFINEMENT: PACK / UNIT, T.D.C.T.					
III.	EXHAUSTION OF GRIEVANCE PROCEDURES: Have you exhausted all steps of the institutional grievance procedure? YESNO Attach a copy of your final step of the grievance procedure with the response supplied by the institution.				
IV.	PARTIES TO THIS SUIT:				
	A. Name and address of plaintiff: ASH BAKRE, TOCI # 784509, PACK UNIT, 2400 WALLACE PACK ROAD, NAVASOTA, TEXAS 77868				
	B. Full name of each defendant, his official position, his place of employment, and his full <u>mailing</u> address.				
	Defendant#1: DEBORAH KENDALL, HEAD PHYSICAL THERAPIST, BETO I UNIT,				
	1391 FM 3328, TENNESSEE COLONY, TEXAS 75880				
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you. PLEASE SEE MEMORANDUM IN SUPPORT				
	Defendant#2: JAMES BJORNSON, PHYSICAL THERAPIST, BETO I UNIT, 1391 FM 3328, TENNESSEE COLONY, TEXAS 75880				
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you. PLEASE SEE MEMORANDUM INSUPPORT				
	Defendant#3: DR. ABRON, PHYSICAL THERAPIST, MICHAEL UNIT,				
	2664 FM 2054, TENNESSEE COLONY, TEXAS 75886				
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you. PLEASE SEE MEMORANDUM IN SUPPORT				
	Defendant#4: MICHAEL SIZEMORE, MEDICAL DEPARTMENT PROGRAM MANAGER, BETO I UNIT, 1391 FM 3328, TENNESSEE COLONY, TEXAS 75880				
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you. PLEASESEE MEMORANDUM IN SUPPORT				
	Defendant#5: DOE, MEDICAL GRIEVANCE INVESTIGATOR, OFFICE OF				
	PROFESSIONAL STANDARD (NTMB) TOCI HEALTH SERVICES DIV. HUNTSVILLE, TEXAS				
	Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you. PLEASE SEE MEMORANDUM IN SUPPORT				

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V.	STATEMENT OF CLAIM:			
	State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how each defendant is involved. You need not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember the complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT. PLEASE SEE MEMORANDUM IN SUPPORT			
VI.	RELIEF:			
	State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.			
	PLEASE SEE MEMORANDUM IN SUPPORT			
VII.	GENERAL BACKGROUND INFORMATION:			
	A. State, in complete form, all names you have ever used or been known by including any and all aliases. PRINCE ASH BABATUNDE BAKRE			
	B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you. 00784509			
VIII.	SANCTIONS:			

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A. Have you been sanctioned by any court as a result of any lawsuit you have filed? YES 1/NO

B. If your answer is "yes," give the following information for every lawsuit in which sanctions were

1. Court that imposed sanctions (if federal, give the district and division):_____

____YES ____NO

imposed. (If more than one, use another piece of paper and answer the same questions.)

2. Case number:

3. Approximate date sanctions were imposed:

4. Have the sanctions been lifted or otherwise satisfied?

C.	Has any court ever warned or notified you that sanction	ns could be imposed?	_YES_/NO
D.	If your answer is "yes," give the following information (If more than one, use another piece of paper and answer		ning was issued.
	1. Court that issued warning (if federal, give the distr	rict and division):	
	2. Case number:		
	3. Approximate date warning was issued:		
Executed	JUNE 28, on: JULY 01 , 2019 DATE	Am Adabe	
		(Signature of Plaintiff))
	IFF'S DECLARATIONS I declare under penalty of perjury all facts presented in	n this complaint and attachments	thereto are true
	and correct.		
2.	I understand, if I am released or transferred, it is my current mailing address and failure to do so may resul		nformed of my
	I understand I must exhaust all available administrative	ve remedies prior to filing this lav	
4.	I understand I am prohibited from bringing an <i>in forma</i> civil actions or appeals (from a judgment in a civil incarcerated or detained in any facility, which laws frivolous, malicious, or failed to state a claim upon vimminent danger of serious physical injury.	l action) in a court of the Unite suits were dismissed on the growhich relief may be granted, unl	ed States while ound they were less I am under
5.	I understand even if I am allowed to proceed without pr filing fee and costs assessed by the court, which shall I inmate trust account by my custodian until the filing f	be deducted in accordance with the	
a' 1,1'	(0) 28 1 0 TUN TUN		
Signed thi	s (O) 28 (Day) day of <u>TULY</u> TUNE (month)	year) (year)	
		Am Adalence	
		(Signature of Plaintiff))

WARNING: Plaintiff is advised any false or deliberately misleading information provided in response to the above questions may result in the imposition of sanctions. The sanctions the court may impose include, but are not limited to, monetary sanctions and the dismissal of this action with prejudice.